## P01000014769

| (Re                     | equestor's Name)   |           |
|-------------------------|--------------------|-----------|
| (Ac                     | ldress)            |           |
| (Ac                     | ldress)            | <u></u>   |
| (Cit                    | ty/State/Zip/Phone | #)        |
| PICK-UP                 | WAIT               | MAIL MAIL |
| (Bu                     | usiness Entity Nam | ne)       |
| (Do                     | ocument Number)    |           |
| Certified Copies        |                    | of Status |
| Special Instructions to |                    |           |
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Office Use Only



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## **COVER LETTER**

| TO: Amendment Section Division of Corp | •   |  |   |
|--|---|--|---|
| NAME OF CORPO                          | RATION: Realdex Inc                         | <b>C</b> .   |   |
| DOCUMENT NUM                           | BER: P0100001476                            | 9  | ,   |
| The enclosed Articles                  | of Amendment and fee are su                 | bmitted for filing.  |   |
| Please return all corre                | spondence concerning this mat               | tter to the following:   |   |
|  | Rupen Nana                                  |  |   |
|  |   | Name of Contact Person   | n   |
|  | Realdex Inc.                                |  |   |
|  |   | Firm/ Company  |   |
|  | P.O. Box 1152                               | ·  |   |
|  | •   | Address  |   |
|  | Windermere, Flor                            | ida 34786  |   |
|  |   | City/ State and Zip Cod  | e   |
| rea                                    | aldex1@gmail.com                            | 1  |   |
| 100                                    |   | ed for future annual report  | notification)   |
|  |   |  |   |
| For further information                | on concerning this matter, pleas            | e call:  | •   |
| R Nana                                 |   | 407  | . 476-4764  |
| Name                                   | of Contact Person                           | at (Area Co  |   |
| 2 1990                                 |   | 71100 00   | at the Buy mine Totophone Transcer  |
| Enclosed is a check for                | or the following amount made p              | payable to the Florida Depa  | artment of State:   |
| ■ \$35 Filing Fee                      | □\$43.75 Filing Fee & Certificate of Status | □\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | □\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy |
| •                                      |   |  | is enclosed)  |
| Ma                                     | iling Address                               | Street   | Address   |
| Am                                     | endment Section                             | Amend  | Iment Section   |
|  | ision of Corporations                       |  | on of Corporations  |
|  | . Box 6327                                  |  | Building  |
| Tal                                    | lahassee, FL 32314                          | 2661 E   | Executive Center Circle   |

Tallahassee, FL 32301

|   | Articles of A<br>to<br>Articles of Inc<br>of | orporation $\overline{E} \cong \overline{\mathcal{R}}$   |      |
|---|--|--|------|
| Realdex Inc.  |  |  |      |
| (Name of Corporation as   | currently filed with the F                   | lorida Dept. of State)   |      |
| P01000014769  |  |  | ,    |
| (Documer  | nt Number of Corporation (i                  | f known)   |      |
| Pursuant to the provisions of section 607. its Articles of Incorporation:               | 1006, Florida Statutes, this                 | Florida Profit Corporation adopts the following amendment(s  | ) to |
| A. If amending name, enter the new na   | nme of the corporation:                      |  |      |
| N/A   |  | The second   |      |
|   | ation "Corp," "Inc," or "                    | n," "company," or "incorporated" or the abbreviation Co". A professional corporation name must contain the P.A." |      |
| B. Enter new principal office address,  | if applicable:                               | 390 North Orange Avenue  |      |
| (Principal office address MUST BE A S   |  | Suite 2500   |      |
|   |  | Orlando, Florida 32801   |      |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) |  | 390 North Orange Avenue  |      |
|   |  | Suite 2500   |      |
|   |  | Orlando, Florida 32801   |      |
| D. If amending the registered agent an new registered agent and/or the new              |  |  |      |
| Name of New Registered Agent  | Rupen Nana                                   |  |      |
|   | 390 North Orange                             | Avenue, Suite 2500   |      |
|   | (Florida str                                 | reel address)  |      |
| New Registered Office Address:  | Orlando                                      | Florida 32801  |      |
|   | (City)                                       | (Zip Code)   |      |
| New Registered Agent's Signature, if c I hereby accept the appointment as regist        |  | <u>:</u><br>with and accept the obligations of the position.   |      |

Page 1 of 4

Signature of New Registered Agent, if changing

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach.additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

| X Change                      | <u>PT</u> | John Doe    |  |
|-------------------------------|-----------|-------------|--|
| X Remove                      | <u>v</u>  | Mike Jones  |  |
| X Add                         | <u>sv</u> | Sally Smith |  |
| Type of Action<br>(Check One) | Title     | Name        | Address                                  |
| 1) X Change                   | MD        | Rupen Nana  | 390 North Orange Avenue                  |
| Add                           |           |             | Suite 2500                               |
| Remove                        |           |             | Orlando, Florida 32801                   |
| 2) Change                     |           | <u> </u>    |  |
| Add                           |           |             |  |
| Remove                        |           |             |  |
| 3) Change                     |           | _           |  |
| Add                           |           |             |  |
| Remove                        |           |             |  |
| 4) Change                     |           |             |  |
| Add                           |           |             | 4-11-11-11-11-11-11-11-11-11-11-11-11-11 |
| Remove                        |           |             |  |
| 5) Change                     |           |             |  |
| Add                           |           |             |  |
| Remove                        |           |             |  |
| 6) Change                     |           | <del></del> | <u> </u>                                 |
| Add                           |           |             | -  |
| Remove                        |           |             |  |

| L. If amending or adding additional Arti (Attach additional sheets, if necessary). | (Re specific)  |
|--|--|
|  | (be specific)  |
| I/A:   |  |
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| If an amendment provides for an eych   | nange, reclassification, or cancellation of issued shares,   |
| provisions for implementing the ame  | endment if not contained in the amendment itself:  |
| (if not applicable, indicate N/A)  | Address to the same of the sam |
| <b>J/A</b>   |  |
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| he date of each amendment(s) ad                                  | loption: 07/09/12  |
|--|--|
| Effective date <u>if applicable</u> :                            | (no more than 90 days after amendment file date)   |
| •  |  |
| Adoption of Amendment(s)   | (CHECK ONE)  |
| The amendment(s) was/were ado<br>by the shareholders was/were su | opted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.  |
|  | proved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):     |
| "The number of votes cast  | for the amendment(s) was/were sufficient for approval  |
| by   | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,  |
|  | (voting group)   |
| action was not required.  The amendment(s) was/were add          | opted by the board of directors without shareholder action and shareholder opted by the incorporators without shareholder action and shareholder |
| action was not required.   | ·  |
| Dated 07/09/   | <b>12</b>  |
|  | 12   |
| Signature  |  |
|  | lirector, president or other officer - if directors or officers have not been  |
|  | d, by an incorporator - if in the hands of a receiver, trustee, or other court   |
| appoin   | ted fiduciary by that fiduciary)   |
|  | Rupen Nana   |
|  | (Typed or printed name of person signing)  |
|  | Managing Director  |
|  | (Title of person signing)  |